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PROJECT

“MENTORÍA PARA LA INVESTIGACIÓN EN
CONTROL DEL TABACO EN ARGENTINA”

External Evaluation Report

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Mentoría para investigación en control de tabaco en Argentina

External Evaluation Report

EXECUTIVE SUMMARY	4
1-Introduction	6
2- Brief description of the Project.....	6
3- Assessment framework	7
3.1.- The concept of assessment.....	7
3.2.-Assessment of training programs	8
3.3.-Assessment focus.....	9
3.4.- Methodological scope of the external evaluation of the project.....	12
a- Purpose, object and scope of evaluation.....	12
b- Collection and record of information	12
c- Analysis and interpretation	13
d- Communication and Proposals	13
4.-Description of the strategies developed in the program framework and outcome obtained.....	14
4.1- The mission and vision.....	14
4-2- Strategies developed by the program	14
a- Setting-up of the team of researchers.....	15
b- Training processes	16
c- Research	18
4.3.- Outcome:	20
a.-Outcome achieved at individual level.....	20
b.- Outcome achieved at task level.....	22
Application of the knowledge acquired in the research activities and scientific advances achieved.....	22
Production of scientific articles and their publication.....	23
Participation in academic meetings and teaching	25
Inclusion of the training and research experience in the researchers' career	26
c.- Outcome achieved at organizational level.....	29
Creation of an exchange and cooperation network	29
Impact in organizations.....	29
4.4-The program as an organization	30
a.- Adequacy of the planning, sequence and compliance with the activities.....	30

b.- Management of resources, coordination and training of researchers.....	30
c.-The mentoring system as a tool to train health researchers	32
5.-General evaluation of the Project.....	33
Annex 1 Evaluation matrix, interview guidelines.....	35
Annex II Documents	48

EXECUTIVE SUMMARY

The project ***Mentoría para investigación en control de tabaco en Argentina*** is carried out in the framework of the *Global Health Leadership Award (GHLA)* and it is subsidized by *Global Health Research Initiative (GHRI)* and *The International Development Research Centre (IDRC)* of Canada, situated at the Health, Economy and Society Area of the Center of Studies of State and Society [Centro de Estudios de Estado y Sociedad (CEDES)], coordinated by Dr Raúl Mejía.

The most outstanding aspects as a result of the external evaluation process are presented below:

- A strong team of researchers has been organized under the coordination of Dr Mejía. All of the researchers have been under permanent training combining their background education, professional experience and their future prospects as a result of their participation in the Project.
- The outcome of the Project at an individual level is highly significant for all the team members. Each of them mentions there has been an important qualitative development of their professional careers after participating in the Project.
- This qualitative development is also seen in the two researchers who left the Project for different personal reasons.
- This development is also seen in the Project coordinator, since there were significant changes in his professional career, such as being incorporated as a senior researcher at CEDES and becoming a referent in the area of tobacco control in Argentina and progressively, in the region.
- Another outstanding Project result is the creation of a network to cooperate with professionals and institutions specialized in the topic in Argentina and in the region, which increases the possibilities to exchange and publish the work developed in the framework of the Project.
- There is high academic acknowledgement of the team and all the members are better positioned, even the coordinator, as national and regional referents in the topic of tobacco control.
- There is a significant influence of the members of the team on different institutional spaces, especially in the public area. This influence is clear evidence of the direction and accomplishments of the Project as it contributed to the inclusion of the topic of tobacco control in the public agenda.

- The relevance of the research projects developed and still under development by the team members and the written work generated from the result of the different research projects stand out as the Project's outcome.
- Another relevant aspect is the emphasis placed on the massive publication of some of the results of the research with the intention to directly influence the public agenda and to promote the inclusion of the topic of tobacco control.
- As regards the Project management, the planning was consistent with the aims of the Project and there was a very adequate, efficient and effective management of resources in all the areas.
- The coordinator's role was a key component of the Project's management process and according to the results, which are visible and the opinion of the members of the team, it has been skillfully done by Dr Mejía who was deeply committed according to the mentees.

In conclusion, the results achieved by the Project and the coordinator's management are highly valued by the members of the team and the specialized medical community. Considering the consolidation of some of the Project's actions in a future stage, it is advisable to strengthen some aspects, such as the mentoring internal processes among the experienced mentees and the novel mentees and in the mentees' group, the intensification of the scientific production and its publication.

1-Introduction

The following report has been requested by Raúl Mejía, director of the Project, with the intention of conducting an external evaluation of the Project ***Mentoría para investigación en control de tabaco en Argentina*** in the framework of the *Global Health Leadership Award (GHLA)* and subsidized by *Global Health Research Initiative (GHRI)* and *The International Development Research Centre (IDRC)* of Canada, situated at the Health, Economy and Society Area of the Center of Studies of State and Society [Centro de Estudios de Estado y Sociedad (CEDES)], coordinated by Dr Raúl Mejía.

(http://www.idrc.ca/EN/Programs/Global_Health_Policy/Global_Health_Research_Initiative/Pages/default.aspx)

2- Brief description of the Project

Cigarette smoking is the single most important cause of premature death and disability in developed countries. In 2006, according to a report from the Argentinean Ministry of Health and Environment, 33.4% of the population 18 to 64 years of age had smoked cigarettes in the previous 12 months with high rates among both men and women.

Rigorous tobacco control research is needed to provide local decision-makers with evidence-based information for developing effective tobacco control policies and programs to minimize the tobacco epidemic in the region and the concomitant social, economic and health burdens. Tobacco control research is well suited to try new approaches to build capacity in global health research. Because tobacco control research is a complex, multidisciplinary field that requires integration of expertise from a large variety of disciplines, mentoring could be a new tool for training a new generation of researchers.

The aims of the Project are:

- 1- To develop leadership skills in the mentoring group coordinator to lead research teams in global health and to take position and become visible as an educator in Argentina and abroad.
- 2- To create a cadre of researchers in tobacco cessation who will provide politicians with local information about the determinants and consequences of tobacco consumption in Argentina.

The program is helped by the following institutions:

The Program of General Internal Medicine, Hospital de Clinicas (PMIG), University of Buenos Aires, is the first academic general internal medicine program in Argentina. It is also one of the first programs of this kind in South America. PMIG will provide Dr Mejía with protected time (two half days per week) to fulfill the requirements of the proposal, provide technical assistance in clinical research to

the fellows, and access to a specialized library. The participation of PMIG will ensure the inclusion of tobacco in the curriculum of the School of Medicine of the University of Buenos Aires.

The Instituto de Ciencia y Tecnología Regional (ICTER) promotes scientific and technologic research, higher education and community training in Northwest Argentina, a marginal and poor region of the country and it shares geographical, demographic and cultural characteristics with the countries of the Southern Andean region (Bolivia, Peru, Chile). The institution will select and support the local postgraduate students selected for this project.

The University of California San Francisco (UCSF), through the Division of General Internal Medicine, the Medical Effectiveness Research Center, the Comprehensive Cancer Center, and the Tobacco Research and Education Center will provide knowledge and expertise in teaching tobacco control research and peer collaboration.

3- Assessment framework

3.1.- The concept of assessment

The concept of assessment is most frequently associated to the ideas of external control, penalization, appraisal, and valuation or judgment of the degree of sufficiency or insufficiency of a specific issue.

In this sense, most definitions of assessment fall within a dimension that may be deemed normative, that is, within an “ought-to-be” scope which determines an ideal model that stands as the evaluative reference. Hence, assessment is not simply a tool for the creation of new norms or the recreation of others already in existence, but an instrument that enables to determine whether a certain action meets or does not meet the ruling standard.

This weak and incomplete meaning of assessment is unsuitable to review the performance of the social actors involved in a decision-making process, and additionally, it disregards the fact that a process is always altered by the intervention of the actors, through the determination of the intentionality inherent to the decision-making process and the definition of the orientation of such actions.

Conversely, assessment is to be seen as an essential tool for the improvement of the quality of goods and services offered by a programme or project. Thus, it is a valuable component for the plan and follow-up of the actions related to the execution of social projects and programmes.

In the process of construction of a broader definition of assessment, it is possible to enlist a number of features that are inherent to an assessment process and that surely expand its horizon of application.

First, it can be assured that every assessment is a process that generates information and, in this regard, it always implies a systematic effort of approach to a target process or phenomenon of evaluation. However, this information is neither casual nor supplemental. It is produced throughout the assessment itself and creates feedback knowledge on the target object.

From this viewpoint, assessment reveals processes that would otherwise remain hidden, and enables a more precise approach to the nature of certain processes, and their organization, effects, consequences, and intervening factors, among other things.

As far as the object of study of this analysis is concerned, that is, the development of programs and projects, a suitable definition would be as follows:

Assessment is a permanent and constant process of enquiry and appraisal of the management (plan, execution and completion) of a program or project in order to create knowledge and learning that enables the performance of decision-making tasks.

3.2.-Assessment of training programs

The assessment of training programs falls within the efforts to achieve quality education, in other words, education that is pertinent, adequate, effective, efficacious and efficient.

Pertinent training is the one that responds to the needs that originated the training demand and it is adequate when the performance of all its components meets agreed upon quality standards (teachers with an acceptable level of education and good performance, updated programs with strict selection of contents, etc.). Efficacy and effectiveness refer to the accomplishment of the established learning aims and efficiency, to the appropriate use of resources.

The assessment of training programs evaluates not only the achievement of the learning aims proposed and attained, but also, the aspects related to the training process management which enable this knowledge to be acquired.

As regards the skills proposed by a learning program, the assessment tries to find out to what degree they have been acquired through the learning process and what effects they have produced on the target subjects (if they learned and to what extent, if they applied what they learned and what products they have produced as a result of their new knowledge).

Kirkpatrick distinguishes four levels of assessment in training programs. The four levels represent a sequence of program assessment: reaction, learning, behavior and results. Each level is important and impacts the following level.

Level 1: Reaction: assessment in this level inquires about the participants' satisfaction as regards the program and it implies a global appreciation of all the components of a program. A positive and committed attitude to the program produces a valuable tool that allows assessing and improving the program.

Level 2: Learning: It is understood as the extent to which the participant changes attitudes, acquires knowledge and skills as a result of attending the training program. Assessing Learning is important because learning is the main requisite to allow conduct changes to occur.

Level 3: Behavior: It may be defined as the extent to which a change in behavior is produced as a result of the attendance of the participants to the training program. This level measures the learning transference. The behavior changes occurred at work because the participants attended the training program.

Level 4: Results: The results are the effects occurred because the participants attended the program and applied their knowledge. Final results may include a qualitative change in work results of the trainees or new products.

As regards the second aspect of the inquiry, the training process management, the focus is on the value of the adequacy of the planning used according to the target subjects and the feasibility of the actions; the sequence and fulfillment of the activities; the use of resources available and the results achieved; the changes in plans, the problems encountered and the ways of solving them.

3.3.-Assessment focus

This evaluation applies the framework of the *outcome mapping*. This choice is based on the two following reasons: firstly, this is the methodology used by CICTA team to carry out the evaluation; secondly, because it focuses not only on the results, but also on the processes applied to achieve the results, especially on the changes occurred on the actors who took part. This type of analysis allows a more dynamic and accurate vision of the contributions to the project.

Outcome mapping is an integrated methodology of planning, follow-up and assessment which focuses on the research and visualization of one type of specific result, the outcome. Outcome is understood as "the changes in behavior, relationships, activities and/or actions of people, groups and organizations a program directly works with"¹.

Direct partners are defined as the people, groups and organizations the program directly interacts with and foresees opportunities to influence. It considers that every direct partner has its own logic, time and individual way to carry out the task.

¹ Ear,S; Carde, F y Smutylo, t. "Mapeo de alcance. Incorporando aprendizaje y reflexión en programas de desarrollo".LUR and Centro de Investigaciones para el Desarrollo, Canada, 2002 (Edition in Spanish)

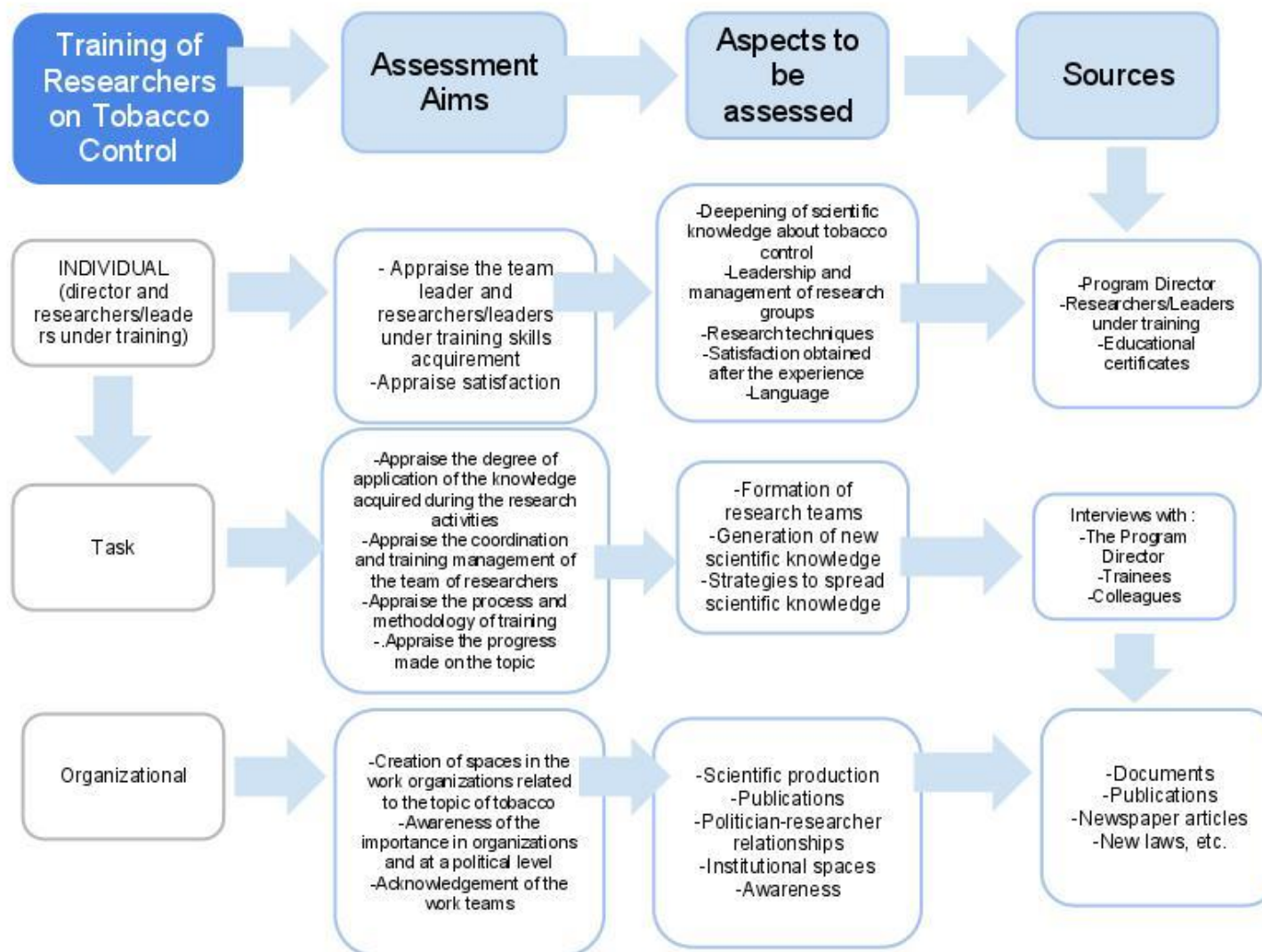
This methodology proposes to follow-up a project in three areas: the changes in the partners' behavior, the strategies of the program and the way in which it works as an organization. Through the study of these three aspects, the methodology joins the evaluation of *process* and the evaluation of *result*.

Outcome mapping does not seek evidence of the achievements of the project from the point of view of a cause-effect lineal conception, where the project is the cause of those achievements; but it acknowledges that the changes are the result of multiple non-lineal events; it does not try to attribute the achievements to one intervention. It is from this point of view that the logical bonds between the interventions and the changes in behavior are analyzed.

The scope of the strategies developed, the description of the changes (outcome) and the operation of the program as a whole as an organization are analyzed in this process of assessment. But, since this is the assessment of a mentoring program and being its main aims the development of new skills in the people involved in the program (partners), the assessment will focus on the analysis of the changes generated by the program.

These changes will be studied on three areas: firstly, the changes in the skills of the people at an individual level, that is to say, the new knowledge acquired as a result of the program experience, and also, the satisfaction of going through this process; secondly, the changes in people's tasks and in the products produced by their new performance; and finally, the possible organizational changes or impacts as a result of the application of the new skills.

In the chart that follows, the aspects to be studied in relation to the results produced by the training process are described.



From this point of view and following the methodology of the outcome mapping framework (strategies-changes-organizations), information will be gathered about how the training program works as regards its management strategies which enable the achievement of the proposed aims.

In conclusion, the assessment proposed and conducted should enable to:

- Analyze and appraise the outcome obtained by the program as regards the generation of new skills.
- Know the expected and unexpected effects attributable to the program.
- Obtain a description of the activities of the project and appraise its contribution to the achievement of the proposed aims.
- Record achievements and lessons learned and practices generated in relation to the management of the project.
- Propose some recommendations to ensure the achievement of the proposed aims.

3.4.- Methodological scope of the external evaluation of the project.

a- Purpose, object and scope of evaluation.

The purpose of this report is to assess the development of the project ***Mentoría para investigación en control de tabaco en Argentina*** from its commencement in 2008 to present. The aim is to produce information that contributes to understand the results achieved, considering its strengths and weaknesses, and to facilitate the future decision making.

As regards the development stages of the Project, this report focuses on the evaluation of the outcome, that is, the formulation of queries and the appraisal of the method of implementation of actions and also the results achieved.

The evaluation consists in the review of all the documentation obtained in the framework of the Project, the actions carried out by the members of the program, the opinions and considerations expressed by the director and mentees and also by other members of the community.

b- Collection and record of information

The following techniques were used to collect the necessary information:

- Documents produced during the execution of the Project.
- Secondary sources of information (information from the press and from academic institutions)
- Interviews with the actors involved (the guidelines of the interviews done are attached in the methodological annex of the report)

c- Analysis and interpretation

The analysis of the information obtained was made through the following techniques:

- Analysis of the content of materials produced in the framework of the Project. This analysis considered all the resources furnished by the different actors involved in the actions of the Project.
- Analysis of secondary data.
- Analysis of the content of interview replies to open questions formulated in a way that enabled the interviewees to express freely on matters of relevance concerning the Project.

Within the framework of the Project, a triangulation of information sources was made (analysis of documents and interviews), in order to contrast data and to obtain a full vision of the scope of the program from multiple perspectives. Thus, the evaluation sought to consider both the perspective of the different actors involved in the management of actions and the viewpoints of the agents external to the program.

The interpretation was made on the basis of criteria emerging from the analysis of consistency, agreed standards, and well-grounded critical judgments. Hence, the evaluation emphasizes the importance of considering the Project relevance (relationship between aims and requirements of the program members and also the final target subjects of the program, tobacco addicts in general), effectiveness (relationship between outcome and proposed aims), and efficiency (relationship between outcome and resources used).

d- Communication and Proposals

In order to function as a valuable understanding and decision-making source, the evaluation process must reflect the information obtained as clearly as possible, and suggest the course of action or proposals for the improvement of the Project. This evaluation report endeavours to materialize and make a contribution to this stage of the process.

Despite the common difficulties inherent to any evaluation process, there was enough information to conduct a reliable analysis of the development of the Project, which enables to make suitable appraisals and recommendations.

The whole process of analysis and interpretation of the information obtained is summarized and systematized in the *ad hoc* built evaluation matrix, which is attached to this report.

4.-Description of the strategies developed in the program framework and outcome obtained.

4.1- The mission and vision.

The Project commenced in 2008 at the request of Global Health Research Initiative (GHRI) and subsided by Global Health Leadership Award (GHLA) to train researchers in tobacco cessation, with the coordination of Dr Raúl Mejía. The Project's vision is to contribute to reduce the tobacco epidemic in Argentina and its concomitant social, economic and health burdens. The aim proposed is a 5% reduction of tobacco consumption in Argentina towards 2015, which would have a great impact in public health due to a reduction of mortality for cardiovascular disease.

The Project's mission aims at a double purpose. On one hand, to strengthen Raúl Mejía's leadership and management skills to improve his ability as a mentor in public health research allowing him to become more visible as an educator in Argentina and South America.

On the other hand, to develop a new generation of researchers on the field of tobacco consumption cessation who will provide political leaders with relevant information based on scientific evidence to promote tobacco control policies and programs in Argentina.

The program is situated at the Health, Economy and Society Area of the Center of Studies of State and Society (CEDES)

4-2- Strategies developed by the program

The program developed a series of strategies directed at achieving the following aims:

- a.- The creation and training of a team of researchers (mentees)
- b.- Once the team of mentees was set up, each of the mentees undertook individual training according to their interests in the subjects related to tobacco control and research methodology.
- c.- At the same time, the team coordinator continued his training process focusing on strengthening his skills to manage teams of researchers and to communicate in English.
- d.- Once this initial training process was complete, each of the researchers being trained (mentees), undertook a research project in the field of tobacco control as part of the training process and under the supervision of the coordinator (mentor).

e.- While the research projects were being carried out, relationships were established with other institutions interested in tobacco control in the field of health (health centers, training centers and research centers) and public administration and/or the political sphere.

f.- The results obtained in each of the research processes were published.

Each of the strategies used is analyzed in detail below.

a- Setting-up of the team of researchers

An interdisciplinary team of six researchers under training was set up. The integration of the team of researchers was done in cohorts in two stages. The first cohort was made up of three medical professionals (Jonatan Konfino, Bruno Linetzky y Vilma Almeida) chosen after a selection process in different regions of the country. This group began a training process in different organizations according to their interests. Once the training process was complete, they began research being tutored and supervised by the team coordinator.

After 18 months and once these three mentees completed their training, a new cohort of mentees was recruited (Lisandro Colantonio, Marcelo Simi y Lorena Peña) who followed the steps of the first group. Once the second group completed the training, they were tutored by the researchers under the general coordination of the team coordinator.

The Project's participants were recruited from different provinces in Argentina, (Entre Ríos, Chubut and Buenos Aires), through a national call. They were selected from different fields, including social sciences, public health and law. The group of researchers under training was made up of five physicians and one sociologist.

Education and origin of the mentees

Mentee	Background Education	Province
Jonatan Konfino	Physician	Buenos Aires
Bruno Linetzky	Physician	Buenos Aires
Vilma Almeida	Physician	Chubut
Lisandro Colantonio	Physician	Buenos Aires
Marcelo Simi	Physician	Entre Ríos
Lorena Peña	Sociologist	Buenos Aires

b- Training processes

The field of study of Tobacco Control requires a complex view that involves biological aspects, social aspects related to the patients' behavior, the way they live, their habits, etc., and the characteristics and conditions of the environment. Therefore, the education and specialization of each of the mentees was directed to the acquisition of conceptual tools that would allow them to deal with this problem thoroughly.

Each of the mentees and the team leader took different training courses according to their interests. The coordinator guided the choice of training activities. Almost all the researchers took the Tobacco Control Course at Hopkins and the team's training choices as a whole showed a strong orientation towards research methodology in public health.

Dr **Konfino** has developed his career in tobacco control since 2008 in the framework of his Fellowship at *Hospital de Clínicas* under the direction of Raúl Mejía. He has taken two courses of Tobacco Control at Hopkins and a Master's degree on Clinical Efficiency. His aim was to acquire quantitative skills for the design and performance of projects on clinical research and health policies and services. This branch of medicine considers the application of basic methods from epidemiology, statistics, decision sciences and social sciences to improve efficiency, equity and quality of health services. Since he completed his training process, he acquired new knowledge and skills in this specialty field in the framework of the Program, and as a result, he directed his work to public health and joined the Ministry of Health as a specialist.

Dr **Linetzky** has been working in the field of tobacco cessation since 2007 in the Ministry of Health. His work was supported and financed by a Bloomberg scholarship between 2007 and 2009 and he worked closely with the Tobacco Cessation Team at *Hospital Italiano*. The main purpose of his work was to advocate for tobacco cessation topics. His training process in CICTA team is directed to the acquisition of knowledge in statistics and applied mathematics and primary and secondary data processing and research techniques. He has not completed his Master's Degree in Biostatistics.

Dr **Colantonio** has been exclusively working on the field of public health research for the last few years. He has been doing research on cardiovascular diseases where tobacco was one of the risk factors. His specialization was done to deepen his knowledge on the field of tobacco cessation and qualitative research.

Dr **Almeida** has been interested in tobacco control since 2001 and she was in charge of the *Department of Non-transmissible Diseases*. She had attended different training courses about tobacco, the program fell within a line of work regarding tobacco topics related to training and management. A huge difference in occurrence was observed between urban and rural populations and within this group, between those descending from native peoples and those who did not. She generated a project to become part of CICTA team. Apart from taking the Tobacco Control course, and following her interests,

she took training courses on qualitative methods of research and she deepened her knowledge on how to do research in native peoples. At a moment during the two years that the training course lasted, she had to drop out due to personal problems.

Ms. **Peña** (sociologist) worked on topics related to tobacco control before she joined CICTA's project. She was a research assistant in a research project on the Training of Physicians on Tobacco Topics, under the direction of Raúl Mejía. Her training, still in progress, is on tobacco control and she is doing a master's degree on Epidemiology.

Dr **Simi** showed his interest in risk factors for non-transmissible diseases two years before joining CICTA, when he prepared his doctoral thesis at the University of La Plata, in close relation with PROPIA group, a program to prevent heart attacks. This group works on risk factors for programs on non-transmissible diseases with a community approach. His work for his doctoral thesis consisted of the evaluation of the base line and the impact of the interventions in health carried out in Balcarce on the Demobal² Project.

In relation to his interests, he took two specific training courses, one on epidemiology and the other on biostatistics at the University of Buenos Aires. For personal reasons, he had to leave the team and he could not develop his research project.

Below there is a summary of the training process developed by each of the team members.

Mentee	Courses	Venue
Jonatan Konfino	Online course "Global tobacco control course"	John Hopkins School of Public Health. (JHSP).
	The Global Tobacco Control Certificate Program	John Hopkins School of Public Health. (JHSP).
	"Gender-responsive tobacco control training workshop"	IDRC-Ottawa
	"Master in Clinical Effectiveness".	University of Buenos Aires
	Fellowship in General Internal Medicine	Hospital de Clínicas. Buenos Aires
Bruno Linetzky	Master in Biometry-(1st year)	University of Buenos Aires
Vilma Almeida	Native peoples. Nation-State Relation Qualitative Research Techniques.	FLACSO, Argentina
Lisandro Colantonio	Global Tobacco Control Certificate Program	John Hopkins Bloomberg School of Public Health
	Qualitative Research	University of Barcelona, Spain
	TOEFL Institutional Testing Program (ITP)	
	PhD Fellowship	Fulbright Foundation

² The study was carried out in three stages, there was a survey of the life style as regards risk factors, then there were a series of community interventions in the physical and nutritional areas and after that, measurements were taken throughout a period of time to see how the risk factors varied.

Marcelo Simi	- “Basic and Advanced Epidemiology”	National Academy of Medicine
	“Introduction to descriptive Statistics”	CONICET.
Lorena Peña	Completed the first year of the “Specialization in Epidemiology”	University of Lanus
	Global Tobacco Control Certificate Program	John Hopkins Bloomberg School of Public Health
	Regular classes of English	

The team coordinator deepened his knowledge in three areas: leadership of public health research groups, tools for the management of programs and tools to communicate in English.

The training activities in the field of management of public health research aimed at improving his group leadership skills and his skills to communicate his knowledge to policymakers as regards tobacco control policies. He also reinforced his pedagogical skills to improve his strategies of leadership, orientation and supervision of groups of researchers under training. Finally, he acquired project management techniques and knowledge to improve his skills to plan, monitor and assess programs.

Below there is a summary of the most important points in the training process of the team coordinator:

Team leader	Courses	Venue
Raúl Mejía	Program for Educators in the Health Care Professions	Harvard Macy Institute
	Leading Innovations in Health Care & Education Course	Harvard Macy Institute
	Introductory course on Outcome Mapping	GHILA-Havana, Cuba.
	English	

c- Research

During the first three months of training each of the mentees developed a research proposal on different areas of the field of tobacco cessation under the coordination of the team leader.

Dr **Konfino** participated on two research projects in the framework of CICTA. One of them was related to HIV patients consulting with infectious disease specialists. As a result of the improvement of HIV treatments, nowadays, HIV patients do not die due to AIDS; they can have a normal life. However, the drugs they are administered increase cholesterol levels, which means that smoking is more detrimental to HIV patients than to other patients. The research referred to the question of whether the specialist took into account the fact that the HIV patient smoked or not. In order to do this, 120 infectious disease specialists treating HIV patients were interviewed in the City of Buenos Aires.

The other research project he participated in was about the effects of the inclusion of a brief course on tobacco effects in the curricula at the School of Medicine. The research referred to the analysis of the effects the inclusion of a brief course on the topic would have on medicine students. Both research projects have been completed.

Dr Konfino has recently been awarded a new scholarship to do research on the “Determination of goals of cardiovascular morbi-mortality and risk factors control” under the direction of Dr Mejía.

Dr **Linetzky** did a sub-analysis of the “Global Use Tobacco Survey” conducted in 2007 on 2000 people. The analysis of the socio-economic level of the population under study was incorporated through multilevel analysis techniques to this survey conducted by the Ministry of Health about tobacco addiction in teenagers. The results lead to conclusions about the incidence of social determinants on health, especially on the teenage population. This project has been completed. The multilevel analysis was tutored by Daniel Ferrante and Dr Ana Diez Roux, from the University of Michigan.

Dr **Colantonio** is working to develop an intervention against smoking by means of using the cell phone. This application works in the following way, when the patients want to quit smoking, they receive support by means of text messages that help them through the process. This tool was used in England on 200 patients. Even though there is not a well-defined profile of target subjects, it is generally better accepted among young adults. Dr Colantino, works on the transcultural adaptation of the tool into Spanish.

In the near future, there will be a pilot test directed to 100 smokers approximately, to analyze the possibility of applying this tool using the methodology of focus groups. The aims are not only to test the tool, but also to obtain more information about the system’s users. Afterwards, it will be relevant to do a study of the efficacy (replica of the study done in England).

Nowadays, the contents of the tool are being decided. The original data base was 1000 messages and it was reduced to 600 messages because many of those messages were not used or because it was observed that there were no differences, for example, according to gender. The messages are being translated and there is a process of double translation to increase their validity.

Ms. **Peña** is developing a qualitative study on non-assisted tobacco cessation. The reasons for choosing this topic of research are based on the observation that most studies about tobacco cessation are financed by the pharmaceutical industry (which in turn is the producer of drugs to quit smoking). Her work hypothesis is that most people quit smoking without the help of drugs. Throughout this study, she intends to explore the motivations and obstacles tobacco addicts find when they decide to quit smoking and what strategies they use.

Nowadays, she is doing the field study.

Dr **Almeida** and Dr **Simi**, could not develop their research proposals.

Below there is a summary of the research projects completed and under development by part of the team:

Mentee	Research	Venue
Jonatan Konfino	Knowledge, Attitudes and Practices Regarding Smoking and Cessation Advice: a survey of physicians who see HIV/AIDS patients in Buenos Aires	CEDES
	Knowledge and attitudes regarding tobacco use among medical students in Buenos Aires	CEDES
	Transcultural adaptation CHD policy model	Ministry of Health and University of San Francisco, California
Bruno Linetzky	Relation between SES and tobacco consumption among adolescents in Argentina. Multilevel analysis of the Global Youth Tobacco Survey.	Ministry of Health
Lisandro Colantonio	Transcultural adaptation of a mobile phone-based intervention for smoking cessation in Argentina	CEDES
Lorena Peña	"Tobacco cessation without medical assistance"	CEDES
	"Study about salt consumption"	CEDES funded by PAH

4.3.- Outcome:

CICTA team has achieved a series of aims at an individual level, at task level and at organizational level. The achievements are described below.

a.-Outcome achieved at individual level

The team incorporated a considerable amount of knowledge which varies for each of the members according to their role in the team, their background education and their specific interests to develop their professional careers. In general terms, they acquired specialized knowledge in tobacco control, public health research methodology and English. Moreover, some of them acquired specific skills to manage research groups and to guide them towards specific research methodologies (qualitative, statistics, etc.).

Dr **Konfino** deepened his knowledge about tobacco control as a result of his training experience at John Hopkins, and he also developed the strategies to obtain funds to finance research projects, topics related to leadership of research groups and mentoring. His Master's Degree reinforced his knowledge of public health. The research experience allowed him to learn how to become a researcher which he capitalized on future research.

Dr **Linetzky** acquired new knowledge on research methodology as a result of this experience, especially primary and secondary data processing and the design and drafting of research projects. He also acquired experience to do "multilevel analysis" which will allow him to carry out research at a community level using different data bases.

He also learned an interesting variety of techniques to write messages for different audiences, including massive social communication languages which enabled the publication of the study results worldwide. The communication tool used contributed to the positioning of the topic in the media and later on to the enactment of the Anti-tobacco Law.

At the same time, he profited from the fulfilling team work experience and the relationship with other researchers in the area.

As a result of this experience, Dr **Colantonio** deepened his knowledge on the topic of tobacco cessation and he also acquired:

- Knowledge on qualitative research and on work with primary data on research and training projects;
- Knowledge on behavior and social components indispensable to treat diseases such as tobacco addiction, cardiovascular diseases, Chagas disease, etc.; and
- Knowledge of English that would allow him to develop his work in his area of interest communicating with other researchers abroad.

Although Dr **Almeida** interrupted her training process, she acknowledges that what she learned during the time she was part of the team is usefully applied to the work she is currently doing. She works as the Provincial Director of Epidemiology and Health Information in Tierra del Fuego where there is a huge migrating population that lives in a vulnerable situation. The knowledge acquired on qualitative research methodology and on consumption and tobacco is very useful. She is also developing two research projects as part of her job: Qualitative research on the situation of the health network of Tierra del Fuego and an evaluation of the planning capabilities of the sanitary network from a qualitative point of view with a Carrillo Oñativia Scholarship.

Ms. **Peña** has learned about different aspects related to smoking that were not part of her education as a sociologist as a result of her experience in the training and research processes which are currently being developed. The most important among these aspects are the incidence of tobacco in health, legal matters related to tobacco consumption and tobacco cessation methods. She also studied research methodology. This knowledge has enabled her to successfully become a member of other research teams at CEDES and at the Ministry of Health.

Although Dr **Simi** had to leave the team, he applies what he has learned when he teaches and gives courses about research methodology at the *Universidad Adventista de Entre Rios*. After leaving the team, he also applied his knowledge to give a course on research methodology in Rio Gallegos for medical residents. The course dealt with the basic contents for residents to acquire the tools that would enable them to write research projects and to design presentations at academic meetings. Next year, he hopes to offer courses on research methodology at the School of Medicine to different scientific societies from Paraguay. In the near future, he also plans to give courses to stop smoking and to organize the creation of an integral center for tobacco control.

Below there is a summary of the fields of specialization of the team of researchers:

Mentee	Field of Specialization
Jonatan Konfino	Non-transmissible diseases control. Management of health policies.
Bruno Linetzky	Non-transmissible diseases control – Management of population data on these diseases and formulation of information for the development of public policies.
Vilma Almeida	Public Health Management –Provincial Director of Epidemiology and Health Information.
Lisandro Colantonio	Public Health Research – Epidemiology and especially cardiovascular diseases and their risk factors. Research on cardiovascular diseases.
Marcelo Simi	University teaching and research – Risk factors of non-transmissible diseases.
Lorena Peña	Epidemiology

Dr Mejía could improve his skills to coordinate teams of interdisciplinary research and his communication skills due to the formal courses and the learning experiences when he supervised and guided the mentees. The acquirement of this new knowledge has allowed him to have access to new job and field research experiences and to become a referent on tobacco cessation topics in Argentina.

b.- Outcome achieved at task level

Application of the knowledge acquired in the research activities and scientific advances achieved.

As a result of the learning experience and the application of knowledge at work, there was an advance in knowledge of the tobacco control field, in some of the cases unprecedented in Argentina, and on many occasions the results were published in academic and scientific articles.

Konfino was aware about the treatment when HIV patients consulted with infectious disease specialists. After the research he wrote several articles that were published. The research on patients with HIV became his master's degree thesis which is being evaluated.

Linetzky developed his project about the relation among smoking, adolescence and social context from a study where the multilevel analysis was applied.

Colantonio is working on the transcultural adaptation of a new tobacco cessation tool through the use of the cell phone.

Peña is still developing her research project from a qualitative perspective about the strategies tobacco addicts use to quit smoking without taking drugs.

Mejía was aware on three substantial areas: the relation between gender and smoking, new methods of tobacco cessation and smoking as a risk factor in cardiovascular diseases, after his experience in coordination and research in the program.

The production was included in widely published articles.

Production of scientific articles and their publication.

An important aspect to be considered among the results of the Project is the publishing of the studies and the research carried out. This suggests a contribution not only to the development and production of specific knowledge on the object of the research, but also significant support for the inclusion of the topic of tobacco control in the public agenda. These results are eloquently shown in the summary attached to this report (Press clipping).

Konfino, Linetzky, Mejía and Almeida are authors of different articles which were published in the academic sphere and in some cases they were directed to the mass media. Almeida is one of the authors of the second guide to prevent tobacco addiction, which is under external evaluation.

Some of the articles written by the team of researchers and its coordinator are mentioned below.

Mentee	Article	Venue	Year
Jonatan Konfino	Poster: Knowledge and attitudes regarding tobacco use among medical students in Buenos Aires.	SGIM Meeting	2010.
	Poster: Physicians' knowledge of the health impacts of smoking on their HIV-positive patients in Buenos Aires	Phoenix, Arizona	2011
	"Effects of an educational intervention about tobacco use in a school of medicine".	J Gen Intern Med	2011
Jonatan Konfino and Raúl Mejía	Why should people with HIV/AIDS be treated for smoking? Bibliography revision.	Updates on AIDS	2011
Bruno Linetzky	Poster: Multilevel analysis of the Global Youth Tobacco Survey.	Argentinean Conference Tobacco or Health.	2010
	Writing of an information article for policymakers		2010
	Relation between the prevalence of smoking in teenagers and poverty through a contextual analysis.	Surveillance Bulletin. Non-transmissible diseases and risk factors. Ministry of Health	2010

Linetzky B, Mejia R, Ferrante D.	Socio-economic factors, tobacco consumption and related attitudes in youth in Argentina. A multilevel analysis, submitted to Nicotine Tobacco Research.		
Lisandro Colantonio (et all)	Development and Validation of a Microsimulation Economic Model to Evaluate the Disease Burden Associated with Smoking and the Cost-Effectiveness of Tobacco Control Interventions in Latin America.	Value in Health	2011
Lisandro Colantonio (et all)	Estimation of the burden of cardiovascular disease attributable to modifiable risk factors and cost-effectiveness analysis of preventative interventions to reduce this burden in Argentina.	BMC Public Health	2010

Team Leader	Article	Venue	Year
Raúl Mejía, Daniel Ferrane, Moran A et al.	Coronary Heart Disease and Stroke Attributable to Major Risk Factors is Similar in Argentina and the United States: the Coronary Heart Disease Policy Model,	International Journal of Epidemiology.	2011
Braun S, Mejia R, Barnoya J, Gregorich S, Pérez-Stable EJ.	Tobacco advertising and press coverage of smoking and health in ten years of Argentinean Newspapers.	CVD Prevention and Control	2011
Mejia R, Salgado MV, Pérez-Stable EJ, Primack B, Kaplan C, Gregorich S, Alderete E.	Association of Media Literacy with Cigarette Smoking among Indigenous Multiethnic Youth. Nicotine and Tobacco research		2011
(coauthor)	Physician counseling of pregnant women about active and secondhand smoking in Argentina	Obstetrics and Gynecology Act	2010
(coauthor)	Challenges in the prevention and reduction of women's tobacco use in Argentina, "Shadow report to the sixth periodic report by the government of Argentina"	United Nations Committee On The Elimination Of All Forms Of Discrimination Against Women, 46 th	2010
(coauthor)	New version of the National Guidelines on Tobacco cessation.		2010

Participation in academic meetings and teaching

The new knowledge produced by the team was published in different national and international academic circles and it was also communicated by the permanent task of teaching of almost all the members of the team and its coordinator in various training centers. University teaching in the area of health is an excellent multiplying task and it contributes to raise consciousness on the students about tobacco control. Colantonio, Simi and Mejía develop intense teaching work that contributes to the communication of the topic in the community of health professionals.

Moreover, Mejía is currently working at the University of Buenos Aires as Thesis Director of Dr Victoria Salgado of her doctorate project on the “Use of tobacco industries’ websites by students from the school of medicine”.

Dr **Konfino** has communicated the results of his research effectively: the research about smoking and HIV patients was published in scientific articles, in a press gazette which appeared on digital media and in reports for the AIDS Department of the Ministry of Health, also in scientific societies, among them, the Scientific Society of Infectious Diseases, which after the publication of his article included a chapter on the importance of smoking in HIV patients in the Guide of Infectious Diseases, generally consulted by infectious disease specialists.

Dr **Colantonio** teaches degree courses and postgraduate courses at the School of Medicine of the University of Buenos Aires, multiplying the transference of knowledge with his students in his graduate and postgraduate courses. He participated in the presentation of the results of his research in Orlando in November 2011.

Dr **Almeida** is working to boost the enactment of the provincial law in the Province of Tierra del Fuego to adhere to the national law to continue working on the prevention of smoking to reduce the number of youths who are initiated in the habit.

In the chart below, there are some of the presentations done by the researchers in academic meetings and their teaching work.

Mentee	Conference/Teaching	Venue	Year
Jonatan Konfino	Conference: "The effect of training students from the School of Medicine in tobacco"	Society of General Internal Medicine Meeting in Minneapolis	2010
	Conference: "The effect of training students from the School of Medicine in tobacco". Final results	Argentinean Tobacco or Health Conference	2010.
	Conference: Physicians' knowledge of the health impacts of smoking on their HIV-positive patients in Buenos Aires	The annual meeting of the Society of General Internal Medicine in Phoenix Arizona	2011
Lisandro Colantonio	Professor of the Master's Degree on Health Services and Systems Administration.	School of Medicine, University of Buenos Aires (UBA)	2011
	Professor of the Postgraduate Course on Social and Community Health corresponding to the Sixth Cohort.	School of Medicine, University of Buenos Aires (UBA)	2011
	Panelist. Early Career: Global Cardiovascular Health Opportunities (Panel Discussion).	American Heart Association Scientific Sessions, Orlando FL	2011

Team Leader	Conference/Teaching	Venue	Year
	Conference: "Tobacco Control Research in Latin America" at the Society of General Internal Medicine Meeting.	Minneapolis, USA	2010
	Co-chair invited the "Resource group on Mentoring"	<u>Canadian Coalition for Global Health Research</u> CCGHR	2010
	Teaching of a short course on tobacco cessation for 4 th year students of medicine.	Argentina	2009

Inclusion of the training and research experience in the researchers' career

In most cases, CICTA Project has been in line with the professional development of the members of the team, which supposes that the choice of candidates was pertinent and that this experience is added to a tradition in training experts in this area producing a significant qualitative change.

All the researchers agree on the fact that the possibility of accessing specialized training and the possibility of being incorporated to research projects in their area of interest is a landmark in their professional careers.

As a result of the participation in the training and research projects, most of the mentees were enabled to access job proposals with positive results in the development of their careers and/or strengthen their positions in their current jobs. Each of the mentees has a position in different strategic places in relation to the topic of tobacco.

Both **Linetzky** and **Konfino** work in the Ministry of Health, in the area of *Health Promotion and Non-transmissible Diseases Control* (Non-transmissible chronic diseases surveillance), where tobacco addiction is one of the topics of interest.

Linetzky works analyzing population data on these diseases and formulating information for the development of public policies where tobacco is one of the most important determinants. The statistic knowledge acquired as part of the process of training and the research experience, allow him to replicate the study and carry out new studies in the Ministry of Health on other non-transmissible diseases.

Linetzky and Konfino reflect on the impact of their participation in the program in the following way:

“What CICTA did was to train us not just in the topic of tobacco control, but in how to generate projects, acquire research techniques, and communicate (the results of the research). (...) (It generated) a mass of critical people. We have worked (the researchers) a lot together and we have worked well (...), 6 or 7 people working together. A kind of work network has been generated, even though it is not formal. This is very interesting and Dr Mejía said he wanted that. (Some relationships were established with other organizations as a result of the research projects), the University of Buenos Aires, the Infectious Diseases Society, The Department of AIDS of the City of Buenos Aires, which helped us to get in contact with hospitals. It is difficult to estimate CICTA’s imprint, but it has certainly been left on us”. (Linetzky, Konfino)

Colantonio, who currently works on public health research, is an advisor for the Chagas Disease Program. The non-vector control of Chagas Disease is carried out through surveys to patients in primary health care. He is interested in non-transmissible diseases (cancer). He is satisfied with the experience he had with the team which he evaluates as very positive and as a step forward in his career as a researcher. Moreover, his work in the team, supported by the coordinator, has enabled him to be selected for a Fulbright Research Scholarship, as he expressed:

“One last comment to add to your evaluation is that I have recently been selected as a recipient of a Fulbright scholarship to complete a doctorate course in Epidemiology in the United States. Raúl Mejía was one of the three referents who gave me recommendation letters for the application. I am currently applying to universities in the US. The fact that I was selected for a Fulbright scholarship is a very important step in my career as a researcher”.

Almeida is currently working in the area of health management as the *Provincial Director of Epidemiology and Health Information in Tierra del Fuego*. The knowledge acquired in the course has enabled her to deal with the following management topics:

- Adaptation of the *Plan Nacer* for migrating native peoples after generating a constructive critic activity which enabled her to reach agreement after having discussions with the native people and the representatives of the financing organizations through a better understanding of the problem.

- As a referent of tobacco control in the province, she is working with politicians to get 100% free coverage for people who want to quit smoking and to avoid the flexibility of the local anti-tobacco laws in relation with the prohibition to smoke in public spaces.

Peña's experience in the project is coherent with her line of work throughout her professional career. She is interested in deepening her knowledge in the field of epidemiology. Being a part of CICTA's team has enabled her to be part of other research teams working on tobacco control related topics, risk factors and non-transmissible diseases. Among these, a study which is currently being developed, on the knowledge and perceptions about salt and sodium consumption in relation with the labeling of products stands out. She is also part of a study on cervical cancer and HPV, as a result of the recommendation of Dr Mejía, with a Carrillo Oñativia scholarship.

(The Project) "Made a great contribution (in my career), it was very positive, not only because it gave me the opportunity to do a specialization, but also because it opened new doors... and it is the reason I am participating in other research projects, not just about tobacco". (Peña, sic)

Simi, is working in the area of university teaching as dean of the School of Medicine in *Universidad Adventista* of Paraguay.

The chart below shows the areas of work of the research team.

Mentee	Place of Work
Jonatan Konfino	Health Promotion and Control of Non-transmissible Diseases, Non-transmissible Chronic Diseases surveillance.
Bruno Linetzky	Health Promotion and Control of Non-transmissible Diseases, Non-transmissible Chronic Diseases surveillance.
Vilrna Almeida	Provincial Director of Epidemiology and Health Information .Ministry of Public Health.
Lisandro Colantonio	Advisor for the Chagas Disease Program, National Health Ministry; Scholarship recipient for the Research Training Program for Tobacco Control in Argentina (CICTA) and Reviewer of the Argentine Cochrane Center IECS of the Cochrane Collaboration.
Marcelo Simi	Dean of the School of Health Sciences of the <i>Universidad Adventista</i> of Paraguay.
Lorena Peña	Social Studies Center - Cedes

Finally, in the case of the team coordinator, the experience to manage the research and training team also meant a *"qualitative change"* (sic) in his career. The most eloquent piece of evidence of that change in his career is his designation as senior researcher at CEDES. The experience gained and the acknowledgement of his peers progressively grant him a better position in the area of tobacco control as a national and regional referent.

c.- Outcome achieved at organizational level

Creation of an exchange and cooperation network

As a result of the team work experience, it was possible to create a formal and informal network with professionals and other specialized organizations related to the field on interest, in Argentina and abroad. These relationships were established intentionally, as part of the coordinator's task, and also as the natural result of each of the work processes and the publishing of the research projects' outcome.

Different benefits that were really positive were achieved as a result of the creation of this network. Firstly, there was an exchange of experience and knowledge with professionals in the field, all of them from different training centers in countries with a varied level of consciousness and development of tobacco control at an academic and social level. Secondly, the fact that the importance of tobacco control for health was made public and the inclusion of this topic in the public agenda in Argentina and in the region.

Finally, there is high academic acknowledgement of the team and the researchers and team coordinator are recognized as referents in tobacco control in Argentina and the region.

Impact in organizations

As a result of the creation of the network and the fact that the work was made public, there was certain influence in different organizations.

The work developed by Linetzky, Konfino and Colantonio enabled the strengthening of this area in public administration. The area of Surveillance did not exist in the Ministry of Health before the creation of CICTA's team. The result of the researchers' work contributed to the inclusion of the importance of tobacco control in the public agenda, which was the previous step to the enactment of Federal Anti-tobacco Law No 26687 in June 2011.

On the other hand, the research made public by Dr. **Konfino** supported and contributed to the process of updating the Guide of Infectious Diseases that the Society of Infectious Diseases of Argentina offers for consultation. This guide did not include information about tobacco prevention, and after the publication of the studies on tobacco and HIV in 2009-2010, a specific chapter was included. The publication of the research has undoubtedly contributed to the discussion of the topic in the field of public health.

4.4-The program as an organization

The scope of the Project's management in relation to the coherence of the planning of the Project's activities, especially its aims, the sequence and compliance with the activities planned and the management of available resources are analyzed in this section.

a.- Adequacy of the planning, sequence and compliance with the activities

According to what was observed in the development of the strategies, the planning was consistent with the aims proposed and the sequence of activities was adequate. The delays occurred in some of the cases were due to reasons out of the coordinator's control.

The activities that were not completed as in the case of the two mentees that left the team and did not do the research, could not be foreseen and did not happen because of internal problems that were the result of team dynamics, but because of personal reasons that exceeded the Project's framework. It was beyond the commitment expressed by each of the team members, as they mentioned in the interviews.

In both cases, even though they abandoned the team, they profited from what they learned and they applied their experience in their current jobs, in teaching and health management areas, which was of interest for the Project's aims.

b.- Management of resources, coordination and training of researchers

The management of resources refers not only to the management of funds, but also to the use and organization of institutional spaces, the people who are part of the team and the relationships with professionals and organizations within the Project's context.

An intelligent and efficient management and use of available resources were observed, which were the components that influence directly the viability and sustainability of the Project.

As regards the management and coordination of the team members, it is important to make a detailed analysis about the recruiting, selection and mentoring processes carried out.

Throughout the interviews done, the reading of the professional experience acquired and the result of the work of the team members, it is observed that all of them, even the ones who left the Project, have a profile that is really adequate to the Project's aims regarding their skills, professional knowledge, commitment and motivation towards the task and the team. An expert and high quality team was created, which shows that the process of selection and incorporation to the team was well adjusted and efficient.

As regards the mentoring strategy, it is important to reflect upon some points. The team leader developed a training strategy based on his own mentoring experience acquired in different training centers abroad, such as in the United States, as a mentor in the project “Tobacco Control Research and training in South America” at NIH-Fogarty Foundation since 1996 and in the Mentoring Program organized by the International Development Research Center (IDRC) of Canada.

On the other hand, he was advised by experts on tobacco control research from the University of California, San Francisco (UCSF) and the Canadian Coalition for Global Health Research, Canada.

According to what the interviewees mentioned, in all the cases, the mentees were supervised and guided very well by the team coordinator. Each of the researchers values and is deeply grateful for the support and guidance received, in relation to the training and also to the bonds established with other organizations and professionals in the field in Argentina and abroad. This support and guidance, apart from the capacity and commitment of each of the mentees, made the productivity of the team possible which is positively appreciated by the academic community.

The mentoring processes developed by the researchers were in some aspects weak. Even though the interviewees assure to be very happy with their own mentoring processes, they admit they did not have so much success when guiding researchers of the second cohort who were in their charge. This opinion is shared with the younger researchers.

“The mentor-mentee relationship is not a relationship that can be forced; it has to develop spontaneously as the result of sharing work interests and having emotional compatibility” (Linetzky)

“It is complex to put two people together, a mentor and a mentee, and expect them to work together. There must be some kind of feeling or emotional bond, I think this is something that generally happens spontaneously, (it cannot be forced), I do not know if I needed more training, theory or a course. It is not related to what it is offered, but to each person’s knowledge. Lorena sent me her work, but we both knew that Raúl had the final word. It is a difficult process...in my case, it worked really well with Raúl, I do not know what would have happened if I had worked with another person” (Konfino)

Maybe, some of the reasons for this weakness were related to the fact that Almeida and Simi left the team; the mentoring relationship among mentees was not balanced. As a result, there was no support among mentees in the mentoring work.

On the other hand, the relationship mentor-mentees is a special relationship where there must be clarity regarding the task to be performed and the pedagogical strategies of support and guidance which are to an extent, the result of the experience on the research field.

Since there isn’t such a big difference between the experiences of the researchers of the first and second cohort, this might be one of the aspects to take into account to get more support on the task from the team coordinator, reinforcing his mentoring skills in his mentees.

c.-The mentoring system as a tool to train health researchers

It is important to take into account that nowadays in Argentina, there are active public policies to boost research and to improve the quality of the universities³. However, this is a long process and the scientific system in Argentina is still far from being consolidated.

The initiative of training researchers is a task that requires the inversion of lots of years. The learning path of a person who is being trained to do research on any of the areas of science takes a number of years and effort maintained by the person being trained and by the system of science and technology, which exceeds the training process of professionals in general. All contributions in this direction constitute a benefit that coincides with the efforts made by the current policy of science and technology in Argentina.

One of the privileged strategies to accomplish these objectives is the system of mentoring, which has undoubtedly become a tool to train researchers and to organize and establish work teams of health researchers. As it is observed in the Project that is the object of this report, this system offers the advantage that there is already a defined field and path of work which integrate in an existing network of researchers in the field.

At the same time, as it is observed in the Project, this system supports:

- a.- the access to specialized postgraduate course information, which in many cases requires the granting of scholarships or some kind of financial aid to pay for it;
- b.- the early development of research work which allows researchers to apply the knowledge acquired;
- c.- the connection with an already existing network of field researchers

The articulation of these three elements reinforces the training processes and stimulates specialized scientific production.

Finally, according to what the specialized bibliography mentions as the most sensitive aspect of a mentoring system, which as a result needs special attention throughout its development, is the mechanism of internal support among novel researchers, so that the experience is profitable for all of them.

In this regard, it would be advisable for CICTA Project to deepen the aspects related to the training of young mentors and to create support and supervision mechanisms from the coordination area. Among other things, it means to revise how the couple mentor-mentee works in the shorter term.

³ Albornoz, M. *“Política científica y tecnológica en la Argentina”*. OEI. Buenos Aires

This system is fit to multiply in other regions of Latin America which share similar scenes as regards the development of their health research systems and this contributes to the generation of leaders/referents in the specialized field in the region.

5.-General evaluation of the Project

The evaluation focused on the analysis of three big areas: the strategies developed, the results achieved and the program management, all in relation to the aims set for the Project. As a result, it is possible to state that:

In relation to what it was observed, the Project has attained significant results for all the actors involved following the different activities planned in its initial design.

As regards the results achieved, it is observed that the Project accomplished good work team integration and a valuable performance in the contribution to knowledge in the field of tobacco control.

The mentees were trained in areas that were pertinent to the Project's aims in highly prestigious institutions in the academic community in Argentina and abroad.

This knowledge was positively valued by the researchers and by the external agents. The training was relevant to the research task proposed and the knowledge acquired could be applied to their respective research projects. The same is true about the training simultaneously acquired by the Project's mentor to coordinate, supervised and support the research team.

The research projects developed by each of the mentees are significantly relevant to the topic of tobacco control and some of them have been carried out with research methodologies which are barely used on medical studies, such as the multilevel analysis methodology or the incorporation of qualitative research techniques.

The team has generated a considerable amount of written work which is a valuable contribution to the state of the art in the field of tobacco control. At the same time, it is observed that there was a suitable intentional strategy to communicate the result of the research by writing and rewriting articles directed to the academic community, policymakers in health management and the general public.

The impact produced by the publication of the results in the scientific community and also in the general public opinion is interesting, as regards the contribution to put the topic of tobacco control in the political agenda in Argentina and the strengthening of public administration areas which had no entity before.

The team, encouraged by the coordinator, worked intensely in the creation of a network with other professionals and institutions interested in the topic in Argentina and abroad, which became a valuable space for the exchange of experiences and learning resulting in knowledge and production of the team.

The relationships were established with universities, health research centers, health centers and academic networks with the aim to collaborate or provide technical assistance to carry out research, to provide institutional support or resources and to participate in activities to communicate or exchange the results of the research. This strategy developed by the team is an interesting and fruitful mechanism to publish their work and to open up new areas of possible interaction and future development.

As a result of the work done, the publication of the scientific production and the personal experiences there is explicit recognition of the mentees and their coordinator in academic spheres as referents in tobacco topics in Argentina and in the region.

Finally, the mentees are highly satisfied by the experience in CICTA Project, since it constitutes a landmark in their professional careers. Not only the training, but also the research projects developed integrate coherently the mentees' careers showing continuity in their professional development. In fact, all of them, even the ones who left the team, are working in strategic areas in relation with the topic of tobacco in public health and academic research and/or teaching, making their contribution to promote a favorable scenario to improve tobacco control strategies in Argentina.

In the case of the coordinator, the results achieved because of his training as regards the management and coordination of public health research teams and the development of his role as mentor, stand out. All these specific skills incorporated have resulted in direct benefits for the Project and in the creation of this institutional and academic network.

In conclusion, the results achieved by the Project and the coordinator's management are highly valued by all the team members and the specialized medical community. In order to consolidate the Project's actions in subsequent stages, it is advisable to consider the strengthening of some aspects, such as the internal mentoring processes of the most experienced mentees towards the novel mentees and the intensification of the mentees' scientific production and its later publication.

Annex 1 Evaluation matrix, interview guidelines

Theme	Area	Variables	Evaluation questions	Source
STRATEGIES	PEDAGOGICAL	Training processes developed	.-Training experiences developed in the framework of this program that are formal or not formal (courses, reading, learning through practice)	Team leader Researchers under training Documents
	RESEARCH Description of the research activities developed	Set-up of the research team	.-Strategies to set up the research team	
		Research studies developed	.-Research developed	
RESULTS	INDIVIDUAL Appraise the acquirement of skills of the team leader and researchers/ leaders under training	Deepening of scientific knowledge about tobacco control	.-Background education, studies .-Knowledge acquired before taking part in the program (specialties, jobs, etc.) .-Acquirement of new knowledge and skills in the specialty field in the framework of this program .-Aspects of the specialization .-Aspects and topic areas or problems the person would like to study deeply	Researchers under training Documents
		Research groups and leadership management	.-Previous training experiences in research teams .-Knowledge learned in relation to the leading of research teams in the framework of this program (new knowledge)	Team leader
		Learning and/or deepening of research techniques	.-Previous knowledge related to research .-How long the person has worked in the field .-Knowledge acquired about the research task related to the field in the framework of the program .-Training experiences developed in research .-Aspects the person would be interested in developing	Researchers under training
		Language	.-Previous knowledge of the language (level) .-Knowledge acquired in the framework of the program, skills not possessed before that can be developed now	

RESULTS	<p>TASK</p> <p>-Appraise the degree of application of the knowledge acquired during the research activities</p> <p>-Appraise the coordination and training management of the team of researchers</p> <p>-Appraise the process and methodology of training</p> <p>-Appraise the progress made in the topic</p>	Set-up of the research team	<p>.-Teams set up in the framework of the program</p> <p>.-Procedure developed to set up the research teams (recruiting strategy, training and selection criteria)</p> <p>.-Leadership strategies developed, team coordination strategies implemented, work guidelines, style</p> <p>.-Difficulties observed in the direction of the research teams</p> <p>.-Solution of the difficulties</p> <p>.-Aspects the person would be interested in developing</p> <p>.-Training of new researchers by the leader or by researchers under training in a formal way in the team or through other experiences</p>	Team leader
		Generation of new scientific knowledge	<p>.-Products, discoveries</p> <p>.-Contribution or Progress made by the teams trained in the field</p>	<p>Team leader</p> <p>Resear chers under training</p> <p>External colleagues</p>
		Strategies to spread scientific knowledge	<p>.-The scientific results obtained have been published in the political field, society in general, through the media</p> <p>.-Number and title of articles, presentations at academic meetings (congresses, meetings, seminars)</p> <p>.-Participation in academic meetings (congresses, seminars, classes, etc. (institutions, dates, etc.)</p> <p>.-Participation in programs for the general public (massive media, others)</p> <p>.-The way in which the person found out about the work developed by the team (colleague)</p>	<p>Team leader</p> <p>Resear chers under training</p> <p>External colleagues</p>

RESULTS	<p>ORGANIZATIONAL</p> <p>Creation of spaces in the work organizations related to the topic of tobacco</p> <p>Awareness of the importance in organizations and at a political level</p> <p>Acknowledgement of the work teams</p>	Politician-researcher relationships	<p>.-They have collaborated in the production of projects/laws</p> <p>.-National and international organizations in the scientific field they have established relationships with because of the research</p> <p>.-The mission and objectives of the scientific organizations they have established relationships with and the field of work</p> <p>.-Political organizations they have established relationships with because of the publication of the knowledge acquired</p> <p>.-The mission and objectives of the political organizations they have established relationships with and the field of work</p>	Team leader Resear chers under training External collea gues
		Institutional spaces	Institutional spaces in the academic field where they have been incorporated, roles performed at the organizations	
		External acknowledgement for the work produced	<p>.-Impact or acknowledgement obtained at the institutions related to the scientific production in the scientific sphere</p> <p>.-Enumeration and type of acknowledgement received in relation to the production developed by the team from other institutions or professionals in the field of study or on other fields (Comments, distinctions, awards, or another type of formal or informal acknowledgement)</p>	Team leader Resear chers under training External collea gues
		Raising of awareness	<p>Impact of the work published in scientific areas</p> <p>Impact in the mass media</p> <p>Impact in the political sphere (bills, development of special programs, etc.)</p>	Team leader Resear chers under training External collea gues

MANAGEMENT	Adequacy of the management strategies	<p>Adequacy of the planning</p> <p>Sequence and compliance with the activities</p> <p>Resources management</p> <p>Problems found and their solutions</p>	<p>-Coherency and consistency of the planning according to the aims proposed</p> <p>-Compliance with the activities</p> <p>-Selection and recruitment of researchers</p> <p>-Coordination of the team of researchers</p> <p>-Description of the problems and their solutions</p>	

Interview guideline

Team leader

Interviewee Information:

Name:

Seniority in the team

.-Previous training experiences in research teams

.-What have you learned as regards research teams leadership in the framework of this program (new knowledge)?

.-Training experiences developed that were formal or not formal in the framework of this program (courses, reading, learning through practice)

.-Previous knowledge on the foreign language (level)

.-Knowledge acquired in the framework of this program, skills you did not have before and you can develop now

.-Teams set up in the framework of this program

.-Procedure developed to set up research teams (recruiting strategy, training and selection criteria)

.-Leadership strategies developed, team coordination strategies implemented, work guidelines, style

.-Difficulties observed in the direction of the research teams

.-Solution of the difficulties

.-Aspects you would be interested in developing

.-Training of new researchers by the leader or by researchers under training in a formal way, in the team or through other experiences

.-Research developed - Description

.-Products, discoveries

.-Contribution or progress made by the team trained in the field

.-Have the results obtained in the scientific field, political sphere or society in general, been published?
What media have they been published in?

.-Number and title of articles, presentations at academic meetings (congresses, meetings, seminars)

.-Participation in academic meetings (conferences, congresses, seminars, classes, etc.) (Institutions, dates, etc.)

.-Participation in programs for the general public (mass media, others)

.-Have you collaborated in the production of bills/laws?

.-National and international organizations in the scientific field you have established relationships with as a result of the research

.-Which are the missions and objectives of the scientific organizations you have established relationships with in the field of work?

.-Political organizations you have established a relationship with as a result of the publication of the knowledge

.-Which are the missions and objectives of the political organizations you have established relationships with? Which is their field of work?

.-Institutional spaces in the academic field where they have been incorporated, roles performed at the organizations

.-Impact or acknowledgement obtained at the institutions related to the scientific production in the scientific sphere

.-Enumeration and type of acknowledgement received in relation to the production developed by the team from other institutions or professionals in the field of study or on other fields (Comments, distinctions, awards, or another type of formal or informal acknowledgement)

.-Impact of the work published in scientific areas

.-Impact in the mass media

.-Impact in the political sphere (bills, development of special programs, etc.)

Interview guidelines

Researchers under training

Interviewee Information:

Name:

Role in the team

Seniority in the team

-Background education, studies.

.-Knowledge in the field of tobacco acquired before entering the program (specialties, jobs, etc.)

.-Acquirement of new knowledge and skills in the specialty field in the framework of the program

.-Aspects you specialized in

.-Training activities you participated in

.-Aspects and topic and problematic areas you would like to continue working on

.-Knowledge acquired before the research task

.-How long have you worked on this topic?

.-Knowledge acquired on the research task in relation to the field in the framework of this program

.-Training experiences developed in research

.-Aspects you would like to continue working on or develop

.-Previous knowledge of the foreign language (level)

.-Knowledge acquired in the framework of this program, skills you did not have before and you can develop now

.-Research developed – Description

.-Products, discoveries

.-Contribution or progress made by the team trained in the field

.-Have the results obtained in the scientific field, political sphere or society in general, been published?
What media have they been published in?

.-Number and title of articles, presentations at academic meetings (congresses, meetings, seminars)

.-Participation in academic meetings (conferences, congresses, seminars, classes, etc.) (Institutions, dates, etc.)

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.-Have you collaborated in the production of bills/laws?

.-National and international organizations in the scientific field you have established relationships with as a result of the research

.-Which are the missions and objectives of the scientific organizations you have established relationships with in the field of work?

.-Political organizations you have established a relationship with as a result of the publication of the knowledge

.-Which are the missions and objectives of the political organizations you have established relationships with? Which is their field of work?

Interview guideline

External Colleague

Interviewee Information:

Name:

**Institution where
he/she works**

**Profession,
specialty**

.-Which is your relationship with the members of the team (institutional, formal, informal)?

.-How did you find out about the work developed by the team?

.-How long have you known the member/members of the team?

.-Do you work with any of the members?

.-Which is your opinion about the training of the members of the team? In which way should they intensify their skills?

.-Which is your opinion about the contribution or progress made by the teams trained in this field?

.-What impact or acknowledgement have they produced at the institutions related to the scientific production in the scientific sphere?

.-Impact produced on the studies of scientific publication

.-Impact on the mass media

.-What does it interest you or your institution about the work developed by the team?

.-In your opinion, what line of work should the team continue to work on?

.-Impact on the political sphere (bills, development of special programs, etc.)

TABACO Y POBREZA

DIARIOS NACIONALES

Infobae.com – 23/05/11

TABACO: LOS MÁS POBRES SON LOS MÁS VULNERABLES

*Un sondeo difundido por el **Ministerio de Salud de la Nación y del Hospital de Clínicas** afirma que los adolescentes con menos recursos son los que están más expuestos al cigarrillo, ya sea por fumar o por recibir el humo ajeno. **La edad promedio de iniciación en el hábito es de 12 años.***



Los adolescentes que concurren a escuelas de áreas más pobres o reciben asistencia social tienen un 33% más de probabilidades de ser fumadores. Así lo asegura un estudio realizado por el **Ministerio de Salud de la Nación y del Hospital de Clínicas**, difundido ayer.

El mismo fue financiado por el Gobierno de Canadá, a partir de la Encuesta Mundial de Tabaquismo en Adolescentes, realizada en 2007 por el Programa

Nacional de Control del Tabaco.

También reporta que los jóvenes más pobres están un 30% más expuestos al humo ajeno y un 35% más si todavía no lo hicieron. **La edad promedio para comenzar a fumar es 12 años.**

Desde el Ministerio de Salud explicaron que los datos que arroja la investigación se condicen con otras recientes de la OMS, que afirman que en los hogares pobres se gasta un 10% de los ingresos en tabaco.

Mario Virgolini, coordinador del Programa Nacional de Control del Tabaco expresó que “si bien el porcentaje de fumadores está bajando lentamente, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres. Y las edades de inicio son muy tempranas”.

El funcionario reclamó “una ley nacional de control de tabaco”, que provea “herramientas clave para evitar que muchos niños de todos los sectores comiencen este camino de la adicción”.

Dicha ley se encuentra en el Congreso a la espera de ser tratada por la Comisión de Presupuesto. y en principio habría consenso para ponerla en marcha.

DATOS DE UNA INVESTIGACION OFICIAL

Los adolescentes pobres son los más vulnerables al cigarrillo

• Tienen mayores riesgos de fumar y de estar expuestos al humo del tabaco ajeno.

Los riesgos del tabaco parecen no alcanzar a todos por igual. Según un reciente estudio del Ministerio de Salud de la Nación y del Hospital de Clínicas, los adolescentes más pobres son los más vulnerables, ya sea porque fuman más o porque sufren una mayor exposición al humo ajeno.

La investigación, difundida ayer, fue financiada por el gobierno de Canadá y se basa en el análisis que hicieron especialistas del ministerio y del hospital sobre la Encuesta Mundial de Tabaquismo en Adolescentes, realizada en 2007 por el Programa Nacional de Control del Tabaco. En ese momento, se encuestaron a casi 5.000 alumnos de entre 13 y 15 años de escuelas de todo el país.

La investigación revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35% más de probabilidades de ser fumadores, un 30% más de estar expuestos al humo de tabaco ajeno y un 35% más de empezar a fumar si aún no lo hicieron, ya

que la edad promedio en la que se empieza a fumar es a los 12 años. Estos jóvenes también tienen un 66% más de chances de comprar cigarrillos sueltos.

Los datos, explicaron desde el Ministerio, van en sintonía con otras investigaciones recientes de la Organización Mundial de la Salud, que señalan que a nivel mundial los hogares pobres gastan el 10 % de sus ingresos en el consumo de tabaco. Y también coinciden con los indicadores elevados de consumo de tabaco y exposición al humo en la población adolescente en general, que habían sido ya señalados en la Encuesta Nacional de Salud Escolar, que también hizo el Ministerio de Salud entre alumnos de escuelas secundarias de todos los niveles socioeconómicos (ver Datos).

“Si bien el porcentaje de fumadores está bajando lentamente, tanto en adultos como en adolescentes, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres, y las edades de inicio muy tempranas. Si contáramos con una ley nacional de control del tabaco, tendríamos herramientas claves para evitar que muchos niños de todos los sectores comiencen este camino de la adicción” ex-

Datos

25,5%

De los alumnos secundarios de entre 13 y 15 años fuman uno o más cigarrillos por día.

65,7%

De los adolescentes que son fumadores reconoció que hizo intentos por tratar de dejar el hábito del cigarrillo.

78%

Estuvo expuesto al humo de tabaco ajeno en uno o más días en la última semana.

38,5%

De los chicos entrevistados en la encuesta tiene un padre o tutor que consume alguna forma de tabaco.

plicó Mario Virgolini, coordinador del Programa Nacional de Control del Tabaco.

La ley que reclama Virgolini está actualmente en discusión en el Congreso. El proyecto de ley fue aprobado por el Senado el año pasado y a fines de abril también obtuvo la aprobación de tres comisiones en la Cámara de Diputados. Falta que lo trate la Comisión de Presupuesto, pero aparentemente hay consenso político para darle curso. De sancionarse, la norma establecería que todos los espacios públicos cerrados –como restaurantes, boliches, bares y bingos– pasen a ser 100% libres de humo. También se restringiría la publicidad de cigarrillos y se agregarían advertencias con imágenes en los atados, como ya se hace en otros países.

Más allá de los cambios en la legislación, Raúl Mejía, médico del Hospital de Clínicas, propuso una medida económica para desalentar el consumo. “Para proteger a los jóvenes, particularmente a los de menor nivel socioeconómico, es necesario incrementar los precios del tabaco, ya que el costo de un paquete de cigarrillos en la Argentina es uno de los más bajos de Sudamérica y del mundo”, afirmó el especialista. ■

Los chicos de bajos recursos fuman más

Una encuesta del Hospital de Clínicas los muestra más vulnerables al tabaquismo. La edad promedio de inicio es de 12 años.

Los alumnos con menos recursos socioeconómicos, de los tres primeros años del secundario, fuman más, están más expuestos al humo del tabaco ajeno y son más vulnerables a empezar a fumar. Estas son las conclusiones de un análisis realizado en 2010 por investigadores del Ministerio de Salud de la Nación y del Hospital de Clínicas sobre la Encuesta Mundial de Tabaquismo en Adolescentes, en la que se consultó a 5000 chicos de entre 13 y 15 años de 125 escuelas de todo el país.

El estudio revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35% más de probabilidades de ser fumadores, un 30% más de estar expuestos al humo de tabaco ajeno y un 35% más de empezar a fumar, en caso de que ya no lo hayan hecho, porque la edad

promedio en la que empiezan a hacerlo es de 12 años. Además, tienen un 66% más chances de adquirir tabaco en forma de cigarrillos sueltos.

“Si bien el porcentaje de fumadores está bajando lentamente, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres, y las edades de inicio, muy tempranas”, aseguró Mario Virgolini, coordinador del Programa Nacional de Control del Tabaco, quien pidió por una ley nacional de control del tabaco. “Así tendríamos herramientas claves para evitar que muchos niños de todos los sectores comiencen este camino de la adicción”, sostuvo. Desde el ministerio, también pidieron aumentar el precio de los cigarrillos, “ya que el costo de un paquete de cigarrillos en la Argentina es uno de los más bajos de Sudamérica y del mundo”. ■

Presupuesto

10%

de los ingresos son los que los hogares carenciados del mundo destinan para el consumo de tabaco, según datos publicados recientemente por la Organización Mundial de la Salud. Esto coincide con los resultados de la investigación realizada a nivel local.



Víctimas - Están más expuestos.

8

SOCIEDAD

entrá a www.elargentino.comLUNES 23 DE MAYO DE 2011 **El Argentino**

Más tabaco en jóvenes humildes

Los adolescentes de menores recursos fuman más y están más expuestos al humo ajeno, reveló el Ministerio de Salud.

Los adolescentes con menores recursos socioeconómicos que asisten a los tres primeros años del secundario fuman más, están más expuestos al humo del tabaco ajeno, son más vulnerables a empezar el vicio y adquieren cigarrillos sueltos con mayor frecuencia.

La información se desprende del análisis realizado en 2010 por el Ministerio de Salud de la Nación y el Hospital de Clínicas sobre la Encuesta Mundial de Tabaquis-



La edad promedio para empezar a fumar es 12 años.

mo en Adolescentes.

El trabajo, financiado por el Gobierno de Canadá, revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35 por ciento más de chances de ser fumadores, 30 por ciento más de estar expuestos al humo ajeno y un 35 por ciento más de empezar a fumar, si aún no lo hicieron, ya que la edad promedio en la que se inician es 12 años. Asimismo, tienen un 66 por ciento más de chances de ad-

quirir cigarrillos sueltos.

Los resultados van en sintonía con los datos publicados por la Organización Mundial de la Salud, en los que se observa que a nivel mundial, los hogares carenciados gastan el 10 % de sus ingresos en tabaco.

“Si bien el porcentaje de fumadores está bajando lentamente, tanto en adultos como en adolescentes, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres, y las

edades de inicio muy tempranas”, explicó Mario Virgolini, del Programa Nacional de Control del Tabaco de la cartera sanitaria.

“Para proteger a los jóvenes, particularmente los de menor nivel socioeconómico, es necesario incrementar los precios del tabaco, ya que el costo de un paquete de cigarrillos en Argentina es uno de los más bajos de Sudamérica y del mundo”, agregó Raúl Mejía, director de la Mentoría en Investigación en Control del Tabaco.

Los adolescentes pobres son los más vulnerables al cigarrillo

Los riesgos del tabaco parecen no alcanzar a todos por igual. Según un reciente estudio del Ministerio de Salud de la Nación y del Hospital de Clínicas, los adolescentes más pobres son los más vulnerables, ya sea porque fuman más o porque sufren una mayor exposición al humo ajeno.

La investigación, difundida ayer, fue financiada por el gobierno de Canadá y se basa en el análisis que hicieron especialistas del ministerio y del hospital sobre la Encuesta Mundial de Tabaquismo en Adolescentes, realizada en 2007 por el Programa Nacional de Control del Tabaco. En ese momento, se encuestaron a casi 5.000 alumnos de entre 13 y 15 años de escuelas de todo el país.

La investigación revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35% más de probabilidades de ser fumadores, un 30% más de estar expuestos al humo de tabaco ajeno y un 35% más de empezar a fumar si aún no lo hicieron, ya que la edad promedio en la que se empieza a fumar es a los 12 años . Estos jóvenes también tienen un 66% más de chances de comprar cigarrillos sueltos.

Los datos, explicaron desde el Ministerio, van en sintonía con otras investigaciones recientes de la Organización Mundial de la Salud, que señalan que a nivel mundial los hogares pobres gastan el 10 % de sus ingresos en el consumo de tabaco . Y también coinciden con los indicadores elevados de consumo de tabaco y exposición al humo en la población adolescente en general, que habían sido ya señalados en la Encuesta Nacional de Salud Escolar, que también hizo el Ministerio de Salud entre alumnos de escuelas secundarias de todos los niveles socioeconómicos (ver Datos).

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La ley que reclama Virgolini está actualmente en discusión en el Congreso. El proyecto de ley fue aprobado por el Senado el año pasado y a fines de abril también obtuvo la aprobación de tres comisiones en la Cámara de Diputados. Falta que lo trate la Comisión de Presupuesto, pero aparentemente hay consenso político para darle curso. De sancionarse, la norma establecería que todos los espacios públicos cerrados –como restaurantes, boliches, bares y bingos– pasen a ser 100% libres de humo. También se restringiría la publicidad de cigarrillos y se agregarían advertencias con imágenes en los atados, como ya se hace en otros países.

Más allá de los cambios en la legislación, Raúl Mejía, médico del Hospital de Clínicas, propuso una medida económica para desalentar el consumo. “Para proteger a los jóvenes, particularmente a los de menor nivel socioeconómico, es necesario incrementar los precios del

tabaco, ya que el costo de un paquete de cigarrillos en la Argentina es uno de los más bajos de Sudamérica y del mundo”, afirmó el especialista.

DIARIOS DEL INTERIOR

Misiones on Line / Nacionales – 23/05/11

LOS JÓVENES DE BARRIOS MÁS HUMILDES TIENEN MAYORES PROBABILIDADES DE FUMAR

Los adolescentes con menores recursos socioeconómicos que asisten a los tres primeros años del nivel secundario de nuestro país fuman más, están más expuestos al humo del tabaco ajeno, son más vulnerables a empezar a fumar y adquieren cigarrillos sueltos con mayor frecuencia, según nuevos datos del análisis realizado en el año 2010 por investigadores del Ministerio de Salud de la Nación y del Hospital de Clínicas sobre la Encuesta Mundial de Tabaquismo en Adolescentes.

El estudio, financiado por el Gobierno de Canadá, revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35 por ciento más de probabilidades de ser fumadores, un 30 por ciento más de estar expuestos al humo de tabaco ajeno y un 35 por ciento más de empezar a fumar, si aún no lo hicieron, ya que la edad promedio en la que se empieza a fumar es a los 12 años. Asimismo, estos jóvenes tienen un 66% más de chances de adquirir tabaco en forma de cigarrillos sueltos.

El estudio analizó los resultados de la Encuesta Mundial de Tabaquismo en Adolescentes realizada en Argentina por el Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación en el año 2007, en el cual se encuestaron a 4926 alumnos de entre 13 y a 15 años de 125 escuelas de todo el país.

Los resultados de esta investigación van en sintonía con los datos publicados recientemente por la Organización Mundial de la Salud, a través de los cuales se observa que a nivel mundial, los hogares carenciados gastan el 10 % de sus ingresos en el consumo de tabaco.

"Si bien el porcentaje de fumadores está bajando lentamente, tanto en adultos como en adolescentes, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres, y las edades de inicio muy tempranas. Si contáramos con una ley nacional de control del tabaco, tendríamos herramientas claves para evitar que muchos niños de todos los sectores comiencen este camino de la adicción" explicó el Lic. Mario Virgolini, Coordinador del Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación.

La Encuesta Mundial de Tabaquismo en Adolescentes fue utilizada por más de 160 países en los últimos 10 años para monitorear la prevalencia de tabaquismo en jóvenes. La información utilizada para evaluar la pobreza de las escuelas fue provista por el INDEC, mediante el Censo 2001, y por investigaciones del Ministerio de Educación de la Nación del año 2007.

“Para proteger a los jóvenes, particularmente los de menor nivel socioeconómico, es necesario incrementar los precios del tabaco, ya que el costo de un paquete de cigarrillos en la Argentina

es uno de los más bajos de Sudamérica y del mundo”, argumentó el Dr. Raúl Mejía, Director de la Mentoría en Investigación en Control del Tabaco y médico del Área de Medicina Interna del Hospital de Clínicas.

Por su parte, el Dr. Bruno Linetzky, investigador del Ministerio de Salud de la Nación y becario de la Mentoría manifestó que “uno de los objetivos que hay que tener en cuenta en el desarrollo de un país es que la brecha entre las clases sociales que más tienen y las que menos tienen disminuya en todo sentido, no sólo a nivel económico sino también a nivel de los indicadores de salud”.

Desde el año 2004 diversos proyectos de ley de control del tabaco han sido introducidos a nivel parlamentario con el objetivo de sancionar una legislación que comprenda a todo el país. Actualmente, se está trabajando en un proyecto de ley en la Cámara de Diputados que incluye medidas eficaces, probadas en todo el mundo para combatir el tabaquismo como la prohibición de la publicidad, la promoción y el patrocinio de los productos del tabaco, la generación de ambientes 100% libres de humo, la prohibición de la venta de cigarrillos sueltos y el adecuado etiquetado de los paquetes de cigarrillos con imágenes alusivas a los daños que ocasiona el tabaco.

Jujuy Al Día / 23/05/11

Nuevos datos de la Encuesta Mundial de Tabaquismo en Adolescentes

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“Si bien el porcentaje de fumadores está bajando lentamente, tanto en adultos como en adolescentes, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres, y las edades de inicio muy tempranas. Si contáramos con una ley nacional de control del tabaco, tendríamos herramientas claves para evitar que muchos niños de todos los sectores comiencen este camino de la adicción” explicó el Lic. Mario Virgolini, Coordinador del Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación.

La Encuesta Mundial de Tabaquismo en Adolescentes fue utilizada por más de 160 países en los últimos 10 años para monitorear la prevalencia de tabaquismo en jóvenes. La información utilizada para evaluar la pobreza de las escuelas fue provista por el INDEC, mediante el Censo 2001, y por investigaciones del Ministerio de Educación de la Nación del año 2007.

“Para proteger a los jóvenes, particularmente los de menor nivel socioeconómico, es necesario incrementar los precios del tabaco, ya que el costo de un paquete de cigarrillos en la Argentina es uno de los más bajos de Sudamérica y del mundo”, argumentó el Dr. Raúl Mejía, Director de la Mentoría en Investigación en Control del Tabaco y médico del Área de Medicina Interna del Hospital de Clínicas.

Por su parte, el Dr. Bruno Linetzky, investigador del Ministerio de Salud de la Nación y becario de la Mentoría manifestó que “uno de los objetivos que hay que tener en cuenta en el desarrollo de un país es que la brecha entre las clases sociales que más tienen y las que menos tienen disminuya en todo sentido, no sólo a nivel económico sino también a nivel de los indicadores de salud”.

Desde el año 2004 diversos proyectos de ley de control del tabaco han sido introducidos a nivel parlamentario con el objetivo de sancionar una legislación que comprenda a todo el país. Actualmente, se está trabajando en un proyecto de ley en la Cámara de Diputados que incluye medidas eficaces, probadas en todo el mundo para combatir el tabaquismo como la prohibición de la publicidad, la promoción y el patrocinio de los productos del tabaco, la generación de ambientes 100% libres de humo, la prohibición de la venta de cigarrillos sueltos y el adecuado etiquetado de los paquetes de cigarrillos con imágenes alusivas a los daños que ocasiona el tabaco.

El Diario – Entre Ríos - 23/05/11

JÓVENES DE BARRIOS HUMILDES SON MÁS PROPENSOS A FUMAR

Los adolescentes con menores recursos socioeconómicos que asisten a los tres primeros años del nivel secundario de nuestro país fuman más, están más expuestos al humo del tabaco

ajeno, son más vulnerables a empezar a fumar y adquieren cigarrillos sueltos con mayor frecuencia.

La información se desprende del análisis realizado en el año 2010 por investigadores del Ministerio de Salud de la Nación y del Hospital de Clínicas sobre la Encuesta Mundial de Tabaquismo en Adolescentes. El estudio, financiado por el Gobierno de Canadá, revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35 por ciento más de probabilidades de ser fumadores, un 30 por ciento más de estar expuestos al humo de tabaco ajeno y un 35 por ciento más de empezar a fumar, si aún no lo hicieron, ya que la edad promedio en la que se empieza a fumar es a los 12 años. Asimismo, estos jóvenes tienen un 66 por ciento más de chances de adquirir tabaco en forma de cigarrillos sueltos, según se indica en un comunicado. El estudio analizó los resultados de la Encuesta Mundial de Tabaquismo en Adolescentes realizada en Argentina por el Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación en el año 2007, en el cual se encuestaron a 4926 alumnos de entre 13 y a 15 años de 125 escuelas de todo el país. Los resultados de esta investigación van en sintonía con los datos publicados recientemente por la Organización Mundial de la Salud, a través de los cuales se observa que a nivel mundial, los hogares carecientes gastan el 10 % de sus ingresos en el consumo de tabaco.

"Si bien el porcentaje de fumadores está bajando lentamente, tanto en adultos como en adolescentes, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres, y las edades de inicio muy tempranas. Si contáramos con una ley nacional de control del tabaco, tendríamos herramientas claves para evitar que muchos niños de todos los sectores comiencen este camino de la adicción" explicó Mario Virgolini, Coordinador del Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación. La Encuesta Mundial de Tabaquismo en Adolescentes fue utilizada por más de 160 países en los últimos 10 años para monitorear la prevalencia de tabaquismo en jóvenes. La información utilizada para evaluar la pobreza de las escuelas fue provista por el INDEC, mediante el Censo 2001, y por investigaciones del Ministerio de Educación de la Nación del año 2007.

"Para proteger a los jóvenes, particularmente los de menor nivel socioeconómico, es necesario incrementar los precios del tabaco, ya que el costo de un paquete de cigarrillos en la Argentina es uno de los más bajos de Sudamérica y del mundo", argumentó el Dr. Raúl Mejía, Director de la Mentoría en Investigación en Control del Tabaco y médico del rea de Medicina Interna del Hospital de Clínicas. Por su parte, Bruno Linetzky, investigador del Ministerio de Salud de la Nación y becario de la Mentoría manifestó que "uno de los objetivos que hay que tener en cuenta en el desarrollo de un país es que la brecha entre las clases sociales que más tienen y las que menos tienen disminuya en todo sentido, no sólo a nivel económico sino también a nivel de los indicadores de salud", finaliza el comunicado de la cartera de salud.

Diario C – Catamarca / Tabaco - 23/05/11

SEGÚN UN ESTUDIO, LOS MÁS POBRES SON LOS MÁS VULNERABLES

Un sondeo difundido por el Ministerio de Salud de la Nación y del Hospital de Clínicas afirma que los adolescentes más pobres son los que están más expuestos al cigarrillo, ya sea por fumar o por recibir el humo ajeno. La edad promedio de iniciación en el tabaco es de 12 años

Los adolescentes que concurren a escuelas de áreas más pobres o reciben asistencia social tienen un 33% más de probabilidades de ser fumadores. Así lo asegura un estudio realizado por el Ministerio de Salud de la Nación y del Hospital de Clínicas, difundido ayer.

El mismo fue financiado por el Gobierno de Canadá, a partir de la Encuesta Mundial de Tabaquismo en Adolescentes, realizada en 2007 por el Programa Nacional de Control del Tabaco.

También reporta que los jóvenes más pobres están un 30% más expuestos al humo ajeno y un 35% más si todavía no lo hicieron. La edad promedio para comenzar a fumar es 12 años.

Desde el Ministerio de Salud, explicaron que los datos que arroja la investigación se condicen con otras recientes de la OMS, que afirman que en los hogares pobres se gasta un 10% de los ingresos en tabaco.

Mario Virgolini, coordinador del Programa Nacional de Control del Tabaco expresó que "si bien el porcentaje de fumadores está bajando lentamente, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres. Y las edades de inicio son muy tempranas".

El funcionario reclama "una ley nacional de control de tabaco", que provea "herramientas clave para evitar que muchos niños de todos los sectores comiencen este camino de la adicción".

Dicha ley se encuentra en el Congreso a la espera de ser tratada por la Comisión de Presupuesto y en teoría habrá consenso para ponerla en marcha.

Quilmes Hoy / 23/05/11

Nuevos datos de la Encuesta Mundial de Tabaquismo en Adolescentes

JÓVENES DE BARRIOS HUMILDES SON MÁS PROPENSOS A FUMAR

Según nuevos datos del análisis realizado en el año 2010 por investigadores del Ministerio de Salud de la Nación y del Hospital de Clínicas sobre la Encuesta Mundial de Tabaquismo en Adolescentes, los jóvenes con menores recursos socioeconómicos que asisten a los tres primeros años del nivel secundario de nuestro país fuman más, están más expuestos al humo del tabaco ajeno, son más vulnerables a empezar a fumar y adquieren cigarrillos sueltos con mayor frecuencia.

El estudio, financiado por el Gobierno de Canadá, revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35% más de probabilidades de ser fumadores, un 30% más de estar expuestos al humo de tabaco ajeno y un 35% más de empezar a fumar, si aún no lo hicieron, ya que la edad promedio en la que se empieza a fumar es a los 12 años. Asimismo, estos jóvenes tienen un 66% más de chances de adquirir tabaco en forma de cigarrillos sueltos.

El trabajo analizó los datos de la Encuesta Mundial de Tabaquismo en Adolescentes realizada en Argentina por el Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación en 2007, en el cual se encuestaron a 4926 alumnos de entre 13 y a 15 años de 125 escuelas de todo el país.

Los resultados de esta investigación van en sintonía con los datos publicados recientemente por la Organización Mundial de la Salud, a través de los cuales se observa que a nivel mundial, los hogares carenciados gastan el 10 % de sus ingresos en el consumo de tabaco.

"Si bien el porcentaje de fumadores está bajando lentamente, tanto en adultos como en adolescentes, la proporción de niños y adolescentes fumadores sigue siendo muy alta, especialmente en mujeres, y las edades de inicio muy tempranas. Si contáramos con una ley nacional de control del tabaco, tendríamos herramientas claves para evitar que muchos niños de todos los sectores comiencen este camino de la adicción" explicó Mario Virgolini, Coordinador del Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación.

Monitoreo

La Encuesta Mundial de Tabaquismo en Adolescentes fue utilizada por más de 160 países en los últimos 10 años para monitorear la prevalencia de tabaquismo en jóvenes. La información utilizada para evaluar la pobreza de las escuelas fue provista por el INDEC, mediante el Censo 2001, y por investigaciones del Ministerio de Educación de la Nación del año 2007.

"Para proteger a los jóvenes, particularmente los de menor nivel socioeconómico, es necesario incrementar los precios del tabaco, ya que el costo de un paquete de cigarrillos en la Argentina es uno de los más bajos de Sudamérica y del mundo", argumentó Raúl Mejía, director de la Mentoría en Investigación en Control del Tabaco y médico del Área de Medicina Interna del Hospital de Clínicas.

Bruno Linetzky, investigador del Ministerio de Salud de la Nación y becario de la Mentoría, manifestó que "uno de los objetivos que hay que tener en cuenta en el desarrollo de un país es que la brecha entre las clases sociales que más tienen y las que menos tienen disminuya en todo sentido, no sólo a nivel económico sino también a nivel de los indicadores de salud".

NOTICIAS INTERNACIONALES

Agencia UPI / 23/05/11

EN ARGENTINA ADOLESCENTES POBRES

SON MÁS PROPENSOS A FUMAR

En el país los adolescentes de los estratos más pobres de la población tienen mayor propensión a comenzar a fumar a edades más tempranas arrojó una investigación.

Los adolescentes con menores recursos socioeconómicos que asisten a los tres primeros años del nivel secundario de nuestro país fuman más, están más expuestos al humo del tabaco

ajeno, son más vulnerables a empezar a fumar y adquieren cigarrillos sueltos con mayor frecuencia, según nuevos datos del análisis realizado en el año 2010 por investigadores del Ministerio de Salud de la Nación y del Hospital de Clínicas sobre la Encuesta Mundial de Tabaquismo en Adolescentes.

El estudio, financiado por el Gobierno de Canadá, revela que los adolescentes que asisten a escuelas de áreas más pobres o que reciben asistencia social tienen un 35% más de probabilidades de ser fumadores, un 30% más de estar expuestos al humo de tabaco ajeno y un 35% más de empezar a fumar, si aún no lo hicieron, ya que la edad promedio en la que se empieza a fumar es a los 12 años. Asimismo, estos jóvenes tienen un 66% más de chances de adquirir tabaco en forma de cigarrillos sueltos.

El estudio analizó los resultados de la Encuesta Mundial de Tabaquismo en Adolescentes realizada en Argentina por el Programa Nacional de Control del Tabaco del Ministerio de Salud de la Nación en el año 2007, en el cual se encuestaron a 4926 alumnos de entre 13 y a 15 años de 125 escuelas de todo el país. Y los resultados de la investigación van en sintonía con los datos publicados recientemente por la Organización Mundial de la Salud, a través de los cuales se observa que a nivel mundial, los hogares carenciados gastan el 10 % de sus ingresos en el consumo de tabaco.